Plumbing Permit Application City of Tualatin 18880 SW Martinazzi Ave.

Print name:

Tualatin, OR 97062

Phone: 503-691-3044 Fax: 503-692-0147 www.ci.tualatin.or.us



OFFICE USE ONLY

Date received:	Permit #
Date Issued:	By: Receipt:

TIPE OF					
☐ New construction	☐ Demolition				
Addition/alteration/replacement	Other:				
CATEGORY OF CONSTRUCTION					
1- and 2-family dwelling	Commercial/industrial				
Accessory building	☐ Multi-family				
Master builder	Other:				
JOB SITE INFORMATION AND LOCATION					
Job site address:					
City/State/ZIP:					
Suite/bldg./apt. no.:	Project name:				
Cross street/directions to job site:					
Subdivision:	Lot no.:				
Tax map/parcel no.:					
DESCRIPTIO	N OF WORK				
☐ PROPERTY OWNER	☐ TENANT				
PROPERTY OWNER Name:	☐ TENANT				
	☐ TENANT				
Name:	☐ TENANT				
Name: Address:	☐ TENANT Fax:				
Name: Address: City/State/ZIP:	_				
Name: Address: City/State/ZIP: Phone:	Fax:				
Name: Address: City/State/ZIP: Phone: APPLICANT	Fax:				
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Date:

FEE SCI							
For special informa				Total			
Description New 1-2 family dwellings (includes	Qty.	Ea.					
New 1- 2-family dwellings (includes 100 ft. for each utility connection SFR (1) bath 240.00							
SFR (1) bath							
SFR (2) bath		300.0					
SFR (3) bath							
Each additional bath/kitchen		125.0)()				
Fire sprinkler (sq. ft.)							
Site utilities		15 (00				
Catch basin or area drain		15.00 15.00					
Drywell, leach line, or trench drain		15.0)()				
Footing drain (no. linear ft.: <u>15.00</u>)		60.	20				
Manufactured home utilities		60.00					
Manholes		15.00					
Rain drain		15.0					
Sanitary sewer (no. linear ft.:		60.00					
Storm sewer (no. linear ft.:		60.0					
Water service (no. linear ft.:		60.0	00				
Fixture or item	-						
Absorption valve		15.0	00				
Backflow preventer		15.00					
Backwater valve		15.00					
Clothes washer		15.0	00				
Dishwasher		15.00					
Drinking fountain		15.00					
Ejectors/sump		15.00					
Expansion tank		15.00					
Fixture/sewer cap		15.00					
Floor drain/floor sink/hub		15.00					
Garbage disposal		15.00					
Hose bibb		15.00					
Ice maker		15.00					
Interceptor/grease trap		15.0	00				
Medical gas (value: \$)							
Primer		15.00					
Roof drain (commercial)		15.00					
Sink/basin/lavatory		15.00					
Tub/shower/shower pan		15.00					
Urinal		15.00					
Water closet		15.00					
Water heater		15.00					
Other: Hourly Fee		60.0	00				
Other:							
Fee Type	Amou	nt	Dat	e Paid			
Permit Fee (minimum \$60.00)							
Plan review (25 % of permit fee)							
State surcharge (12% of permit							
TOTAL PERMIT FEE							

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.